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10/650254
08/27/03
PRO

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonapplications under 37C.F.R. §1.53(b))

Attorney Docket No.

PC11724C

First Inventor

Zheng J. Li

Title

CRYSTAL FORMS OF AZITHROMYCIN

Express Mail Label No.

EV 272782205 US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:
Mail Stop Patent Application
Commissioner for Patents
Box 1450
Alexandria, VA 22313-1450

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification [Total Pages 44] (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 	a. <input type="checkbox"/> Computer Readable Copy (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total sheets 33]	b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies) ii. <input type="checkbox"/> Paper
5. <input checked="" type="checkbox"/> Oath or Declaration [Total pages] a. <input type="checkbox"/> Newly executed (original or copy)	c. <input type="checkbox"/> Statement verifying identity of above copies
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 18 completed) <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (COPY) (when there is an assignee)
18. If a CONTINUING APPLICATION , check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76.	11. <input type="checkbox"/> English Translation Document (if applicable)
<input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP)	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
	13. <input checked="" type="checkbox"/> Preliminary Amendment
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
	17. <input type="checkbox"/> Other:

ACCOMPANYING APPLICATION PARTS

9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (COPY) (when there is an assignee)
11. <input type="checkbox"/> English Translation Document (if applicable)	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
13. <input checked="" type="checkbox"/> Preliminary Amendment	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. <input type="checkbox"/> Other:	

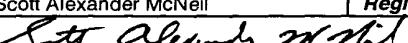
18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37CFR 1.76. Continuation Divisional Continuation-in-part (CIP) of prior application No. 10/152,106

Prior application information: Examiner _____ Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number	28523	or <input type="checkbox"/> Correspondence address below
Name		
Address		
City	State	Zip Code
Country	Telephone	Fax

NAME (Print/type)	Scott Alexander McNeil	Registration No. (Attorney/Agent)	37,185
Signature		Date	27 AUG 2003

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small status. See 37 CFR 1.27

Total Amount of Payment (\$)**2056.00**

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Other None
Order

Deposit Account:

Deposit Account Number	16-1445
Deposit Account Name	Pfizer Inc

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	750	2001	375	Utility filing fee	750
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	filing fee	

Subtotal (1) **\$ 750**

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	77 - 20 =	57 x 18 =	1026
Independent Claims	2 - 3 =		
Multiple Dependent		9 =	280.00

Large Entity **Small Entity**

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue independent claims over original patent

SUBTOTAL (2) **(\$ 1306.00)**

C mplete if Known						
Applicant Number		To Be Assigned				
Filing Date		Herewith				
First Named Inventor		Zheng J. Li				
Examiner Name		To Be Assigned				
Art Unit		To Be Assigned				
Attorney Docket No.		PC11724C				
FEE CALCULATION (continued)						
3. ADDITIONAL FEES		Large Entity		Small Entity		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		Fee Paid
1051	130	2051	65	Surcharge – late fee or oath		
1052	50	2052	25	Surcharge–late filing fee or cover sheet		
1053	130	1053	130	Non-English specification		
1812	2,520	1812	2,520	For filing a request for reexamination		
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action		
1251	110	2251	55	Extension for reply within first month		
1252	410	2252	205	Extension for reply within second month		
1253	930	2253	465	Extension for reply within third month		
1254	1,450	2254	725	Extension for reply within fourth month		
1255	1,970	2255	985	Extension for reply within fifth month		
1401	320	2401	160	Notice of Appeal		
1402	320	2402	160	Filing a brief in support of an appeal		
1403	280	2403	140	Request for oral hearing		
1451	1,510	1451	1,510	Petition to institute a public use proceeding		
1452	110	2452	55	Petition to revive unavoidable		
1453	1,300	2453	650	Petition to revive – unintentional		
1501	1,300	2501	650	Utility issue fee (or reissue)		
1502	470	2502	235	Design issue fee		
1503	630	2503	315	Plant issue fee		
1460	130	1460	130	Petitions to the Commissioner		
1807	50	1807	50	Petitions to the Commissioner		
1806	180	1806	180	Submission of Information Disclosure Stmt		
8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))		
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))		
1801	750	2810	375	Request for Continued Examination (RCE)		
1802	900	1802	900	Request for expedited examination of a design application		
1802	900	1802	900	Request for expedited examination of a design application		
Other Fee (specify)						
SUBTOTAL (2) (\$ 1306.00)				Subtotal (3)		(\$)
(Complete if applicable)						

SUBMITTED BY

Name (Printed/Type)	Scott Alexander McNeil	Registration No. (Attorney Agent)	37,185	Telephone	(860)686-1848
Signature	<i>Scott Alexander McNeil</i>			Date	27 AUG 2003

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